



DEPARTMENT OF FISH AND GAME
CALIFORNIA SALTWATER DIVING RECORD VERIFICATION



1. I hereby certify that I have examined a fish / shellfish in fresh / frozen / preserved condition caught on _____ by Mr. / Ms. _____
 _____ (Month, Day, Year) _____ (Name of Angler)
 of _____
 _____ (Street, City, State, Zip Code) _____ (Home Phone Number)
 at _____
 _____ (Location of Catch) _____ (County)

2. A photo or news item on the fish / shellfish is enclosed: Yes or No

3. Fish / lobster weight _____ lbs _____ oz, or (_____ kg)
 Abalone / scallop length _____ inches, or (_____ cm); two witnesses required:

 _____ (Witness Name) _____ (Street, City, State, Zip Code) _____ (Home Phone Number)

 _____ (Witness Name) _____ (Street, City, State, Zip Code) _____ (Home Phone Number)

4. Scale certification: _____ Date of certification: _____
 _____ (Number) _____ (Month, Day, Year)

5. I have identified the fish / shellfish as a (Common Name): _____
 Genus: _____ Species: _____

6. Optional measurements:
 a. Total length _____ ft _____ inches, or (_____ cm)
 b. Taxonomic measurements: _____
 _____ (Lateral Line Scales, Ray Count, Etc.)
 c. Carapace length _____ inches, (_____ cm), or abalone width _____ inches, (_____ cm)

7. Method of diving (free or SCUBA) and gear used (pole spear, spear gun, etc.) to take specimen:

8. Remarks: _____

 Name: _____
 Title: _____

Record submission form and photograph should be mailed to:

Stephen Wertz
 Department of Fish and Game
 4665 Lampson Avenue, Suite C
 Los Alamitos, CA 90720



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